

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

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JUL 21 2015

Department of Industrial Relations
Office of the Director

Report for the reporting period 7/1/2014 to 6/30/2015
(mm/dd/yyyy) (mm/dd/yyyy)

| | | |
|---|--|-----------------------|
| 1. Name of Labor Compliance Program (LCP) : VALLEY COUNTY WATER DISTRICT | | |
| 2. LCP I.D. Number (assigned by DIR): LCP ID: 2013.01152 | 3. Date of Initial Approval: 3/25/2013 | |
| 4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): LYNDA NORIEGA GENERAL MANAGER 14521 Ramona Boulevard, Baldwin Park, Ca 91706 PHONE: (626) 338-7301, EX: 201 EMAIL: LNoriega@vcwd.org | | |
| 5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, proceed to item 6 on the next page If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102 | | |
| What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary) | | |
| SUBMITTED BY: <i>[Signature]</i> | | |
| <i>[Signature]</i> Signature | Sophia E. Ramirez, LCP Administrator Name and Title | July 14, 2015 Date |

LCP-AR1

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary).

A. List projects handled by LCP within the past 12 months.

| Project Name | Bid Advertisement Date | Prime Contractor | Contract Amount |
|--|------------------------|------------------|----------------------|
| Baldwin Park Operable Unit (BPOU) SA1 Treatment Facility Nitrate By-Pass | 3/12/2013 | RC Foster | \$ 847,020.00 |
| Total | | | \$ 847,020.00 |

B. Summary of all wages and penalties assessed and/or recovered.

| Project Name | Affected Contractor (who directly employed the worker) | Amount Assessed | Amount Recovered | Approval of Forfeiture Requested from Labor Commissioner? __ Yes __ No | Description of Violation |
|--------------|--|-----------------|------------------|---|--------------------------|
| | | | | | |
| Total | | \$0 | \$0 | | |

C. For any amount identified in item B for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

| Project Name | Amount Assessed | Amount Recovered | Explanation |
|--------------|-----------------|------------------|-------------|
| | | | |
| Total | \$0 | \$0 | |

D. For any amount identified in item B for which approval of forfeiture was requested from the Labor Commissioner, please provide the following:

| Project Name | Amount Assessed | | | | | Amount Recovered | | | | |
|--------------|-----------------|-----------|-----------|-------|-------|------------------|-----------|-----------|-------|-------|
| | LC §1776(g) | LC § 1775 | LC § 1813 | Wages | Total | LC § 1776(g) | LC § 1775 | LC § 1813 | Wages | Total |
| | | | | | | | | | | |
| Total | | | | | | | | | | |

LCP-AR1

E. Identify cases that are or were the subject of LC § 1742 proceedings.

| Project Name | Contractor | Nature of Violation | ODL Case # | Current Status |
|--------------|------------|---------------------|------------|----------------|
| | | | | |

F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1?

Please check one: Yes No If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

G. Did you refer any apprenticeship violation to the Division of Apprenticeship Standards (DAS)?

Please check one: Yes No If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____



LCP Inc.
LABOR COMPLIANCE PROVIDERS

1168 E. La Cadena Dr. ▪ Suite 201
Riverside, CA 92507
Phone: (951) 686-3482 ▪ Fax: (951) 346-0545 ▪ Email: inbox@mylcp.org

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Department of Industrial Relations
Office of the Director

State of California – Dept. of Industrial Relations
Office of the Director
Attn: Special Assistant to the Director
455 Golden Gate Avenue, 10th Floor
San Francisco, CA 94102

Re: VALLEY COUNTY WATER DISTRICT (LCP ID: 2013-01152)
LCP Annual Report 2014 - 2015

To whom it may concern:

On behalf of the **VALLEY COUNTY WATER DISTRICT**, enclosed you will find the LCP Annual Report for the 7/1/2014 thru 6/30/2015 period. This annual report is submitted in accordance with California Code Regulations 16431 for the agency's Prop. 84-funded projects, which were subject to the monitoring of an LCP during the reporting period.

Should you require any additional information not provided in this report, please contact me by e-mail at inbox@mylcp.org or by phone at (951) 686-3482.

Respectfully,

Sophia E. Ramirez
Labor Compliance Administrator

Enclosure

cc: **VALLEY COUNTY WATER DISTRICT**